

Division of Health Care Facilities

PRINTED: 02/06/2014
FORM APPROVED

45th 3/22/14

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN1934	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING B. WING: _____	(X3) DATE SURVEY COMPLETED 02/04/2014
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NAME OF PROVIDER OR SUPPLIER

MCKENDREE VILLAGE INC

STREET ADDRESS, CITY, STATE, ZIP CODE

4347 LEBANON ROAD
HERMITAGE, TN 37076

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 831	1200-8-6-.08 (1) Building Standards (1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured. This Rule is not met as evidenced by: Based on observations, it was determined the facility failed to maintain the condition of the nursing home environment. The findings included: Observation of the kitchen mop room revealed the door would not close within the door frame. The finding was verified by the maintenance director and acknowledged by the administrator during the exit conference.	N 831	N 831 1200-8-6.08 (1) BUILDING STANDARDS The facility has and will continue to maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents is assured. On or before March 22, 2014, The Health Center Maintenance staff will attend an in-service. The In-service will be conducted by the Director of Facilities Management or designee and will include: <ul style="list-style-type: none"> • Review of the regulation • Review of the statement of deficiency • Review of the plan of correction • Ensuring mop room doors close within the frame as required 	3/22/14
N 848	1200-8-6-.08 (18) Building Standards (18) It shall be demonstrated through the submission of plans and specifications that in each nursing home a negative air pressure shall be maintained in the soiled utility area, toilet room, janitor's closet, dishwashing and other such soiled spaces, and a positive air pressure shall be maintained in all clean areas including, but not limited to, clean linen rooms and clean utility rooms. This Rule is not met as evidenced by: Based on testing, it was determined the facility	N 848	The kitchen mop room door has been repaired and closes in to the frame as required. Other mop rooms doors have been evaluated to ensure they close within the frame as required. Beginning March 14, 2014 the Director of Facilities Management or designee will monitor for continued compliance through	

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DATE FORM

5899

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If continuation sheet 1 of 2

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN1934	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING B. WING: _____		(X3) DATE SURVEY COMPLETED 02/04/2014
NAME OF PROVIDER OR SUPPLIER MCKENDREE VILLAGE INC		STREET ADDRESS, CITY, STATE, ZIP CODE 4347 LEBANON ROAD HERMITAGE, TN 37076			
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N 831	1200-8-6-.08 (1) Building Standards (1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured. This Rule is not met as evidenced by: Based on observations, it was determined the facility failed to maintain the condition of the nursing home environment. The findings included: Observation of the kitchen mop room revealed the door would not close within the door frame. The finding was verified by the maintenance director and acknowledged by the administrator during the exit conference.	N 831	Quality Improvement audits (See Attachment A-LIC) The audits will be completed weekly for one month and monthly for one quarter. The Administrator or designee will report to the QA/QI committee who will determine the frequency of further monitoring. Completion March 22, 2014		
N 848	1200-8-6-.08 (18) Building Standards (18) It shall be demonstrated through the submission of plans and specifications that in each nursing home a negative air pressure shall be maintained in the soiled utility area, toilet room, janitor's closet, dishwashing and other such soiled spaces, and a positive air pressure shall be maintained in all clean areas including, but not limited to, clean linen rooms and clean utility rooms. This Rule is not met as evidenced by: Based on testing, it was determined the facility	N 848			

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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STATE FORM

4999

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STREET ADDRESS, CITY, STATE, ZIP CODE

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4347 LEBANON ROAD
HERMITAGE, TN 37076

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N 848	<p>Continued From page 1</p> <p>failed to maintain negative air pressure in a soiled utility room.</p> <p>The findings included:</p> <p>Testing of the bio-hazard room adjacent to N-265 had positive air pressure.</p> <p>The finding was verified by the maintenance director and acknowledged by the administrator during the exit conference.</p>	N 848	<p>N 848 1200-8-6.08 (18) BUILDING STANDARDS</p> <p>The facility has and will continue to maintain the negative air pressure in soiled utility areas.</p> <p>On or before March 22, 2014, The Health Center Maintenance staff will attend an in-service. The In-service will be conducted by the Director of Facilities Management or designee and will include:</p> <ul style="list-style-type: none"> • Review of the regulation • Review of the statement of deficiency • Review of the plan of correction • Maintaining negative air pressure in soiled utility rooms <p>The bio-hazard room adjacent to N-265 has been adjusted to ensure it has negative- air flow.</p> <p>Other soiled utility/bio hazard rooms in the Health Center have been evaluated to ensure they continue to have negative air pressure as required.</p>	3/22/14

Division of Health Care Facilities
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If continuation sheet 2 of 2

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N 848	Continued From page 1 failed to maintain negative air pressure in a soiled utility room. The findings included: Testing of the bio-hazard room adjacent to N-265 had positive air pressure. The finding was verified by the maintenance director and acknowledged by the administrator during the exit conference.	N 848	Beginning March 14, 2014 the Director of Facilities Management or designee will monitor for continued compliance through Quality Improvement audits. (See Attachment A-LIC) The audits will be completed weekly for one month and monthly for one quarter. The Administrator or designee will report to the QA/QI committee who will determine the frequency of further monitoring. Completion March 22, 2014		

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If continuation sheet 2 of 2

No. 3356 P. 17

Feb. 20. 2014 12:52PM
McKendree Village - Executive